

CERTIFICATION OF TRAINING
RADIATION PRODUCING EQUIPMENT

THIS CERTIFIES THAT I HAVE received and understood the radiation safety training provided by the facility/equipment supervisor. Training included a review of the contents of:

(place a checkmark as items are reviewed):

- X-ray production for equipment for which this training is provided
- Cornell Radiation Safety Manual for Radiation Producing Equipment
 - radiation dose policy (Chapter 8)
 - 4.1 and the section(s) applicable to the equipment in use
- Operating permit and permit application
- Safe operating - facility supervisor's and manufacturer's
- Biological effects
- Portable instrument training (if applicable)
- Security- equipment cannot be left in a mode where an unauthorized individual might gain access

I HAVE BEEN SHOWN AND UNDERSTOOD THE SAFE OPERATION FOR THE FOLLOWING EQUIPMENT:

_____ BUILDING: _____ RM _____

_____ BUILDING: _____ RM _____

_____ BUILDING: _____ RM _____

Check one:

- I will be a facility operator*
- I will be authorized to perform alignments (diffraction users only)
- I will be a facility user only **

* Operator: operates the equipment and has the authority to perform modifications, repairs and alignments and by-pass interlocks according to the descriptions in the permit application

** User: authorized to turn the equipment on and off and change samples

DATE TRAINING WAS COMPLETED ON _____

PRINT NAME of new user/operator _____

SIGNATURES:

new user/operator

permit holder/operator

Original return to: EH&S 395 Pine Tree Road, Suite 210
Copy to be kept by Permit Holder